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JUL 1 6 2009

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06/25/2009

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07/17/2009 SSANDAR1 0000	0002 192179 10624120	- V #C \ 7 - 17	Alla	(Depositor's name	
		Mill	سنسا	(Signature	
01 FC:1501 1510.00 02 FC <del>c1504 300.00</del>	NA	7.16.	09	(Date	
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/624,120 TITLE OF INVENTION:	07/21/2003 AUTOMATIC OPTIMIZATION (	Chi-Yin Lee IN SPECTRAL DOPPLER ULTRASOUND IMAGING	2003P05220US	6118	

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1510	. \$300	\$0	\$1810	09/25/2009		
EXAMINER		ART UNIT	CLASS-SUBCLASS					
CHENG, JACQUELINE		3768	600-454000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).		n of "Fee Address" (37	2. For printing on the patent front page, list					
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON 1	THE PATENT (print or type	e)				
PLEASE NOTE: Un recordation as set fort	less an assignee is identi h in 37 CFR 3.11. Comp	fied below, no assignee letion of this form is NO	data will appear on the pa I a substitute for filing an a	tent. If an assignee is idessignment.	entified below, the docu	ment has been filed for		
(V) MAINT OF MASI	JNEE		(B) RESIDENCE: (CITY)	and STATE OR COUNTR	RY)			
Siemens	Medical Solu	itions USA,	Inc.	Malvern	ı, PA			
Please check the appropri	ate assignee category or	categories (will not be pri	nted on the patent):	ndividual Corporatio	n or other private group	entity Government		
4a. The following fee(s) a	are submitted:	<b>4</b> b.	Payment of Fee(s): (Please  A check is enclosed.					
Publication Fee (No small entity discount perm Advance Order - # of Copies		mitted)	tted) Payment by credit card. Form PTO-2038 is attached					
			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-2179 (enclose an extra copy of this form).					
<ol> <li>Change in Entity State</li> <li>a. Applicant claims</li> </ol>	SMALL ENTITY status	above) . See 37 CFR 1.27.	b. Applicant is no longe	r claiming SMALL ENTE	TV status See 27 CCD 4	224 1421		
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if requiecords of the United State	red) will not be accepted s Patent and Trademark (	from anyone other than the	applicant; a registered and	omey or agent; or the ass	ignee or other party in		
Authorized Signature	400014			Date 7-6-0				
Typed or printed name	Rosa S. K	im	W 14914	Registration No.				

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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